

預約做乳房篩檢

逐步說明

也備有其他語文版本。

找出您的預約代碼 (Booking Code)

1. 您的預約代碼可以在卑詩癌症局 (BC Cancer) 給您的乳房篩檢信中找到 (請見下面)。

Book your Free Breast Screening Appointment	
To book online: Scan the following QR code or visit: www.screeningbc.ca/bookbreastscreening	 Your booking code: ABC - 1234
To book by phone please call: 1-800-663-9203 Monday to Friday: 8 am – 5:30 pm, Saturday: 8:30 am – 4:30 pm	

輸入您的預約代碼

2. 如所示的在網站上輸入您的預約代碼。
3. 輸入您的代碼之後，點擊 'I'm not a robot' (我不是機械人) 這個方框，為自己進行驗證。
4. 一旦完成，就點擊那個紫色的 'Go to Booking' (前往預約) 按鈕，以便前往下一頁。

Book Your Breast Screening Appointment

To get started, please enter the Booking Code provided in your letter from BC Cancer Screening.

My Booking Code:

XXXXXXXX-XXXX-XXXX

Please call [Client Services](#) if you do not have a Booking Code or need assistance booking your appointment.

[Get step-by-step instructions](#) (translations available)



Go to Booking

確認您符合條件 — 第1部分

5. 選擇所有適用於您的選項，然後點擊 'Submit' (提交)。



[Start or View your Booking](#) | [FAQ](#) | [Contact Us](#)

Confirm Your Eligibility - Part 1



Eligibility



Address



Provider



Appointment



Review



Finish

Select all that apply to you and press Submit:

Note: We will not keep a record of your selection unless you indicate you would like us to update your information.

I have had breast cancer

I have had a total mastectomy (both breasts removed)

I have breast implants

I have had a mammogram on both breasts in the last 12 months outside of the Breast Screening Program

I have breast health concerns such as breast lumps or nipple discharge

I am pregnant or have breastfed or chestfed in the last 3 months

I have had breast surgery in the last 3 months

None of the above

選擇適用於
的選項。

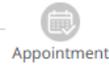


Submit



6. 您如選擇 'None of the above' (以上都不是), 就會前往下一頁。如果您選擇首3個選項的其中一個, 您將可選擇更新您的乳房篩檢記錄及停止接收提示。如果您選擇餘下的選項, 您將會收到有關您的篩檢狀況的通知。

Confirm Your Eligibility - Part 1



Select all that apply to you and press Submit:

Note: We will not keep a record of your selection unless you indicate you would like us to update your information.

I have had breast cancer

Breast screening is not recommended. Please speak to a health care provider about other options.

Update your Breast Screening record and stop receiving reminder notices

I have had a total mastectomy (both breasts removed)

Breast screening is not recommended. Please speak to a health care provider about other options.

Update your Breast Screening record and stop receiving reminder notices

I have breast implants

I have had a mammogram on both breasts in the last 12 months outside of the Breast Screening Program

I have breast health concerns such as breast lumps or nipple discharge

I am pregnant or have breastfed or chestfed in the last 3 months

I have had breast surgery in the last 3 months

None of the above

Submit

If you don't live in BC you are not eligible to book an appointment.

7. 您如選擇 ‘I have had a mammogram on both breasts in the last 12 months outside of the Breast Screening Program’ (我在最近12個月兩邊乳房都做了不在乳房篩檢計劃內的乳房X光造影檢查)，請輸入您最近一次乳房X光造影檢查的日期。

Confirm Your Eligibility - Part 1



Eligibility



Address



Provider



Appointment



Review



Finish

Select all that apply to you and press Submit:

Note: We will not keep a record of your selection unless you indicate you would like us to update your information.

I have had breast cancer

I have had a total mastectomy (both breasts removed)

I have breast implants

I have had a mammogram on both breasts in the last 12 months outside of the Breast Screening Program

Breast screening is not recommended at this time, as having more than one mammogram per year involves certain risks.

Date of your last mammogram on both breasts:

Month & Year*

Used to update your record and send reminder notice when you're due

If you are under 75 when you are due to screen, a new notice will be sent. If you are over 75 when due, you will not receive a notice for screening. You are encouraged to speak with a health care provider at that time about your options. If they recommend it, you can call 1-800-663-9203 to book an appointment every two to three years

I have breast health concerns such as breast lumps or nipple discharge

I am pregnant or have breastfed or chestfed in the last 3 months

I have had breast surgery in the last 3 months

None of the above

Submit

If you don't live in BC you are not eligible to book an appointment.

輸入您最近一次乳房X光
造影檢查的日期。

確認您符合條件 — 第2部分

8. 選擇所有適用於您的選項，然後點擊 ‘Submit’ (提交)。

Confirm Your Eligibility - Part 2

Eligibility — Address — Provider — Appointment — Review — Finish

Select all that apply to you and press Submit:

Note: We will not keep a record of your selection unless you indicate you would like us to update your information.

- I DO NOT have a primary care provider (e.g. family doctor, nurse practitioner, clinic, naturopath) to receive my results
- I am a person who uses a wheelchair
- I can't raise my arm on my own
- I can't stand unassisted for extended periods
- I need other assistance or support during my appointment
- I am a person with hearing loss
- I am a person with a visual impairment
- I need an interpreter during my appointment
- None of the above

Submit

選擇適用於
的選項。



9. 您如選擇 ‘I need an interpreter during my appointment’ (在我的預約期間我需要有傳譯員)，請選擇您想要的語言。如果您想要的語言 沒有被列出，可選擇 ‘Other’ (其他)，然後將您想要的語言輸入文字框。

I need an interpreter during my appointment

Preferred Language*

Used to update your record.

If Other Language, please specify

Submit

請選擇您想要的語言。



確認您的聯絡資料

- 輸入或仔細審核您的個人訊息，包括您的 'Name' (姓名)、'Mailing Address' (郵寄地址)、'Phone Number' (電話號碼)及 'Email' (電郵地址)，然後點擊 'Continue' (繼續)這個按鈕。

Confirm Your Contact Information

Eligibility — Address — Provider — Appointment — Review — Finish

We use this information to communicate with you about your screening appointment

Name
Name on your Driver's License or BC ID used to find your health record.
Legal Last Name
TESTPAT-LN-BREASTPORTAL
Legal First Name
TESTFN-PROMO1
If your name is incorrect, please contact the [Ministry of Health](#) to update your name with them.
Preferred First Name (optional)
SALLY
Name you would like us to use when we contact you, including phone and mail
Booker's Name (optional)
Enter your name if booking for the person listed above

Mailing Address
Mailing Address Line 1*
123 Main Street
Mailing Address Line 2 (optional)
City*
Vancouver
Province
BC
Postal Code*
V5Z 1H1

Phone
You must provide at least one phone number
Home Phone
(444) 444-4444
Mobile Phone
(555) 555-5555
Required if you want the option to get a text reminder 2 days before your appointment.
Text Reminder*
Would you like a text reminder sent to your mobile phone 2 days before your appointment?
Yes

Email
Update your email address
Email*
example@example.com

Continue

提供您的基本保健服務提供者的資料

11. 接著，我們會問您現時有沒有基本保健服務提供者，或者您去接受護理的基本保健服務診所。您必須有基本保健服務提供者或診所，才可以在網上預約做乳房篩檢。
12. 請選擇以下其中一個適用於您的選項：

Provide Your Primary Care Provider Information



Select the option that applies to you:

I currently have a family doctor, nurse practitioner or naturopath in BC to receive my results

選擇適用於您的

I currently have a clinic, walk-in clinic or virtual clinic that I'm registered with to receive my results

最佳選項。

You need a primary care provider or clinic to book online. If you don't have one, please exit the portal and call 1-800-663-9203 to book your appointment. If you prefer, you can call a screening centre near you using the [clinic locator](#).

Find [options to support screening](#) when you don't have a primary care provider.

13. 如果您的選擇是您有基本保健服務提供者或診所，一個新的部分就會出現，要求您輸入他們的資料。您如沒有基本保健服務提供者或診所，請致電1-800-663-9203，通過電話進行預約。您毋須繼續您的網上預約流程。
 - a. 基本保健服務提供者選項：

Provide Your Primary Care Provider Information



Search for your Primary Care Provider

Fill out one or more field(s)

Last Name
e.g. Smith

First Name
e.g. Jane

Clinic Address or Clinic Name
e.g. 123 Street or First Medical Clinic

City/Town
e.g. Vancouver

Phone Number
(XXX) XXX-XXXX

輸入您知道有關您的基本保健服務提供者的訊息。

Clear all

Search

b. 基本保健服務診所選項：

Provide Your Primary Care Provider Information

Search for your Clinic
Fill out one or more field(s)

Clinic Address or Clinic Name
e.g. 123 Street or First Medical Clinic

City/Town
e.g. Vancouver

Phone Number
(XXX) XXX-XXXX

Clear all Search

輸入您知道有關您的基本保健服務診所的訊息。

14. 輸入您能夠提供的訊息，然後點擊‘Search’（搜尋）。如果您不確定某些細節，您不必填妥所有各欄。

15. 然後您會看見一份名單，裏面列出符合您提供的細節的基本保健服務提供者。點擊您的基本保健服務提供者，然後點擊‘Continue’（繼續）。

Refine Results
Fill out one or more field(s)

Last Name
PLISBVDU

First Name
e.g. Jane

Clinic Address or Clinic Name
e.g. 123 Street or First Medical Clinic

City/Town
e.g. Vancouver

Phone Number
(XXX) XXX-XXXX

Clear all Search

1 Primary Care Provider(s) found. Select your provider and address then scroll down to continue.

PLISBVDU, JAGGER
 Address: PINETREE MEDICAL, 458 PINE RD, VANCOUVER, BC V5Z 1G1
Phone: 604-789-7878

My primary care provider and/or address is not listed

Continue

16. 如果您見不到您的基本保健服務提供者被列出，可嘗試在本頁左邊的 ‘Refine Results’ (篩選搜尋結果) 那個部分添加、更改或刪除資料。
17. 如果您的基本保健服務提供者仍然沒有被列出，請選擇 ‘My primary care provider and/or address is not listed’ (我的基本保健服務提供者及/或地址沒有被列出)，然後手動輸入您的基本保健服務提供者的資料，之後點擊 ‘Continue’ (繼續)。

Refine Results

Fill out one or more field(s)

Last Name
PLISBVDU

First Name
e.g. Jane

Clinic Address or Clinic Name
123 street

City/Town
Vancouver

Phone Number
(XXX) XXX-XXXX

Clear all Search

0 Primary Care Provider(s) found.

No results found

My primary care provider and/or address is not listed

Name of Primary Care Provider*
e.g. family doctor, nurse practitioner, midwife

Note: If you don't see a specific primary care provider at your clinic, write "NA" above and fill in fields below.

Name of Clinic*
e.g. First Medical Clinic

Clinic's Phone Number*
(XXX) XXX-XXXX

If we are unable to find your primary care provider you will be linked to a clinic in your community for follow up if needed.

Continue

選擇您的地點

18. 接著，使用搜尋欄來找出最就近您的篩檢中心。

Choose Your Location

Eligibility
Address
Provider
Appointment
Review
Finish

Could not determine your location. Please enter a location within BC in the search bar, select one from the map, or view more results to see all available options.

Search Location



View more Results

Select location and scroll down to continue View All

- 1 Vancouver - X-Ray 505 Breast Screening** Select this Location

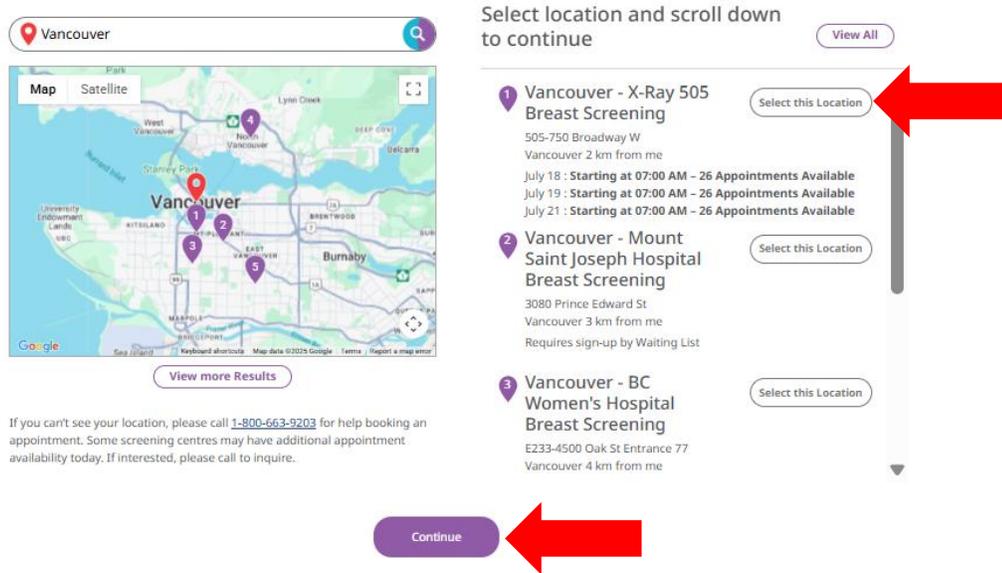
505-750 Broadway W
Vancouver 2 km from me
July 14 - Starting at 07:00 AM - 27 Appointments Available
July 15 - Starting at 07:00 AM - 25 Appointments Available
July 16 - Starting at 07:00 AM - 27 Appointments Available
- 2 Vancouver - Mount Saint Joseph Hospital Breast Screening** Select this Location

3080 Prince Edward St
Vancouver 3 km from me
Requires sign-up by Waiting List
- 3 Vancouver - BC Women's Hospital Breast Screening** Select this Location

If you can't see your location, please call 1-800-663-9203 for help booking an appointment. Some screening centres may have additional appointment availability today. If interested, please call to inquire.

Continue

19. 您一旦找到了您屬意的篩檢中心，就點擊 ‘Select this location’（選擇這個地點），然後點擊那個紫色的 ‘Continue’（繼續）按鈕。

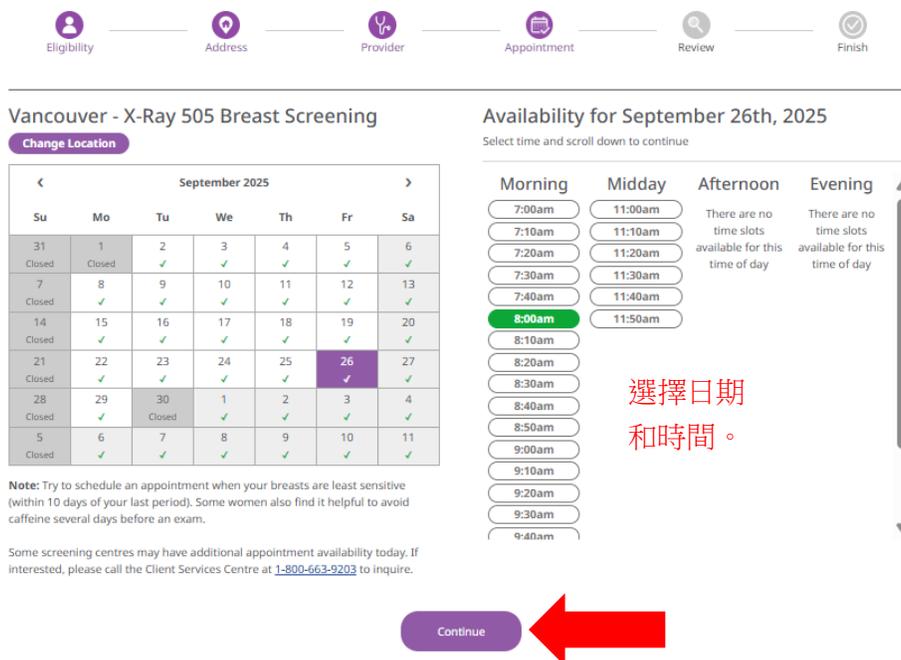


選擇您的日期和時間

20. 接著，您會看見一個日曆，裏面有全部可供選擇的日期和時間。

21. 請選擇您屬意的日期和時間，並點擊那個紫色的 ‘Continue’（繼續）按鈕。

Choose Your Date and Time



確認預約詳情

22. 接著，仔細審核屏幕上顯示的所有詳情，以確定資料是正確的。

Confirm Appointment Details

Eligibility — Address — Provider — Appointment — Review — Finish

Time remaining to confirm: 4:57

 Your appointment has NOT been confirmed yet. Please review your details before completing your booking.

Name
SALLY TESTPAT-LN-CONTACT [Edit](#)

Mailing Address
123 Main Street
Vancouver, BC V5Z 1H1

Email
example@example.com

Phone Numbers
Home: (444) 444-4444
Mobile: (555) 555-5555
Text Reminder: Yes

Primary Care Provider [Edit](#)

JAGGER PLUSBVDU
PINETREE MEDICAL
458 PINE RD
VANCOUVER, BC V5Z 1G1

Appointment Date & Time [Edit Appointment](#)

September 26th, 2025 at 8:00AM

Location
Vancouver - X-Ray 505 Breast Screening
505-750 Broadway W
Vancouver
(604) 879-8700

[Confirm Now](#)

23. 如果資料是不正確的，請點擊 ‘Edit’ (修改) 這個按鈕。

24. 如果資料是正確的，請點擊那個紫色的 ‘Confirm Now’ (立即確認) 按鈕。

您已完成預約！

25. 您已成功進行了預約。

Your Appointment Has Been Booked!



Thank you for booking your appointment.

You can return to the portal to reschedule or cancel your appointment (up to 48 hours in advance) or update your personal or primary care provider information.

If you have any questions, please call 1-800-663-9203.

[Return to BC Cancer Site](#)